



LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
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April 17, 2014

TO: Each Supervisor

FROM: Marvin J. Southard, D.S.W.
Director

SUBJECT: **STATUS REPORT ON THE IMPLEMENTATION OF THE INTEGRATED
BEHAVIORAL HEALTH INFORMATION SYSTEM**

On October 18, 2011, your Board approved the Integrated Behavioral Health Information System (IBHIS or System) Agreement with Netsmart Technologies, Inc. (Netsmart), to provide a product that will enable the Department of Mental Health (DMH) to meet the federal and State mandates for an Electronic Health Record (EHR) and meet County's Strategic Plan goal to achieve a seamless electronic exchange of selected health and human services data across County providers. In order to provide you with a clear picture of the current state of the project, attached is the status report for the months of January through March 2014.

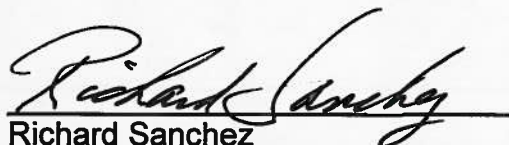
If you have any questions or need additional information, please call me at (213) 738-4601, or your staff may contact Robert Greenless, Ph.D., DMH Chief Information Officer, at (213) 251-6481.

MJS:RK:MM:RG

Attachment

c: Health Deputies
Chief Executive Office
Executive Office, Board of Supervisors
County Counsel
Contracts Development and Administration Division, DMH

REVIEWED BY:


Richard Sanchez
Chief Information Officer

4-24-14
Date



COUNTY OF LOS ANGELES
DEPARTMENT OF MENTAL HEALTH
CHIEF INFORMATION OFFICE BUREAU
PROJECT STATUS REPORT

A. General Information

Project Title: Integrated Behavioral Health Information System (IBHIS)

Prepared by: Adrina Moreno - IBHIS Project Manager

Date Prepared: April 8, 2014

Reporting Period: **From:** January 1, 2014

To: March 31, 2014

Estimated Completion Date: September 30, 2014

Project is: ☐ On Schedule ☐ Ahead of Schedule ☒ Behind Schedule ☐ Completed

If the project is Behind Schedule, explain why, (e.g., changes to scope, constraints outside project team's control, vendor delays, resource constraints, business processes, and major deliverables not completed). Include the impact of the delay and plans for re-alignment.

- See Section B (Current Activity Status) for detailed explanation.

B. Current Activity Status

Provide a high level summary of current activities. Express factual description of current activities in a bulleted list.

- This status report provides the current IBHIS activity status after a three-month delay in delivering these status reports. The project focused all resources on the staged Pilot 1 go-live, beginning December 23, 2013, and through early February 2014. This report provides the activity status as of March 31, 2014.
- Pilot 1 DMH Directly Operated sites began operational use of IBHIS on January 27, 2014.
- Two (2) DMH Legal Entity Providers have successfully completed testing Client Web Services and are now in Production Use.
- Two (2) DMH Legal Entity Providers have successfully completed certification for submitting claims to IBHIS and are now in Production Use.
- All 41 forms requested by DMH for Pilot 1 have been developed. Netsmart is currently revising one (1) form.
- Netsmart has developed 34 of 68 reports requested for Pilot 1.
- All functional requirement gaps were reviewed and addressed with Netsmart.
- DMH and Netsmart have developed a solution for the IBHIS integration with the Americans with Disabilities Act (ADA) software and Netsmart has demonstrated the solution. Netsmart will finalize the solution and prepare it for DMH testing based on end user feedback provided during the demonstration.
- PD/PM Status Meetings continue to resolve contractual, scheduling and project issues and risks.
- Action Item Meetings with Netsmart are held to review progress on project tasks and open issues requiring discussion and decision to keep project tasks moving forward.
- Continue implementation activities and meetings for testing with Legal Entities, end user training, site readiness and roll-out tasks.
- Monitor and manage software modification change submissions and approvals.
- Super users are training DMH end-users for rollouts 3 and 4. Roll-out 3 for Directly Operated sites began on March 31, 2014.
- IS Push is in Production Use and operating daily.

C. Change Requests

List any Change Control Requests identified during this reporting period.

Change Order #	Description	Effective Date
DMH 1	Delay of final date for Detailed Work Plan to 2/3/12	1/11/12
DMH 3	Election of the Order Connect Application Software	6/29/12
DMH 4	Delay of Deliverable 3.1.2 (Provide Dedicated Network) Change of Netsmart Project Director	11/9/12
DMH 5	Acquires Other Professional Services for an Integration Professional	12/21/12
DMH 7	Acquires Other Professional Services to perform an assessment and develop Specifications for Custom Programming Modifications to: <ul style="list-style-type: none"> • Client Web Service • Unique Submitter ID • Second Co-Practitioner • Control Fees 	2/21/13
DMH 8	Acquires other professional Services to establish the CBO	3/29/13
DMH 9	Custom Development: <ul style="list-style-type: none"> • Budget Tracking Account Setup • Capture, validate and store EBP codes from inbound 837P and 837I EDI claims for reporting 	4/2/13
DMH 10	Acquires other professional Services to provide Custom Programming Modifications for: <ul style="list-style-type: none"> • Client Web Services 	6/28/13
DMH 11	Other Professional Services to develop Specifications for: <ul style="list-style-type: none"> • Filtered Program List for Modeling – CR# 13 • Extended Dictionary Object or Solution – CR# 11 • Filtered Program List for Claiming – CR# 12 	8/15/13

Change Order #	Description	Effective Date
DMH 12	<p>Other Professional Services to develop Specifications for:</p> <ul style="list-style-type: none"> Automated 835 Processing in Avatar CalPM – CR# 14 <p>NOTE: [Cost of CN No. 12 will be shared between Los Angeles County and San Francisco County]</p>	8/16/13
DMH 13	<p>Other Professional Services to provide Custom Programming Modifications for:</p> <ul style="list-style-type: none"> 2nd Co-Practitioner – CR# 3 	8/16/13
DMH 14	Election of 40 additional Topaz Digital Signature Pads	8/16/13
DMH 15	<p>Increase dollar amount for Other Professional Services for an:</p> <ul style="list-style-type: none"> Integration Professional 	8/16/13
DMH 16	<p>Other Professional Services to provide Custom Programming Modifications for:</p> <ul style="list-style-type: none"> Capture, validate, and store EBP codes from inbound 837P and 837I EDI claims for reporting – CR# 10 	8/16/13
DMH 17	<p>Other Professional Services to provide Custom Programming Modifications for:</p> <ul style="list-style-type: none"> Control Fees based on Funding Source – CR# 4 	8/16/13
DMH 18	<p>Amend name of Third Party Software vendor for document imaging to:</p> <ul style="list-style-type: none"> Perceptive Software (formerly known as "Kofax Capture") 	9/27/13
DMH 19	<p>Other Professional Services to provide transitional services:</p> <ul style="list-style-type: none"> CBO/PSO 	11/20/13
DMH 20	<p>Other Professional Services to provide transitional services:</p> <ul style="list-style-type: none"> Transfer the Emergency Indicator from an MS) 837 to the Service Line Emergency Indicator field in CalPM 	11/20/13

Change Order #	Description	Effective Date
DMH 21	Other Professional Services to provide custom software modifications for: <ul style="list-style-type: none"> DMH Practitioner Program Filtering Extended Dictionary Object or Solution Filtered Program List for Claiming 	11/20/13
DMH 22	Other Professional Services to provide additional transitional services for: <ul style="list-style-type: none"> CBO/PSO 	12/27/13
DMH 23	Other Professional Services to develop Specifications for: <ul style="list-style-type: none"> Active and Inactive Date for Adjustment Reason Code – CR# 5 Correct Service Location Address for Billing – CR# 9 UMDAP Fee Schedule in Compliance with State Rules – CR# 20 NOTE: [No Cost Change Notice]	2/5/14
DMH 24	Other Professional Services to provide Temporary Staffing to Support IBHIS Roll-Outs	3/3/14

D. Significant Accomplishments for Current Period

Provide a summary of the significant accomplishments and project deliverables during the reporting period. The list should include, primarily, major activities, milestones and key deliverables in a bulleted list.

- On December 23, 2013, DMH began the staged Pilot 1 go-live with Directly Operated clinics using IBHIS in Production Use to document clinical activities beginning January 27, 2014.
- Client Web Service went into Production Use on February 24, 2014 with one (1) DMH Legal Entity Provider.
- One (1) DMH Legal Entity Provider began submitting claims to IBHIS on March 5, 2014.
- As of March 31, 2014, two (2) DMH Legal Entity Providers are in Production Use with IBHIS, and additional Providers are in the testing certification process.

E. Planned Activities for Next Period

Provide a summary of the planned major activities, milestones and project deliverables to be accomplished during the next reporting period. Express your descriptions in a bulleted list

- Roll-out number 4 for Directly Operated sites will begin on May 5, 2014.
- DMH will test the ADA software integration with IBHIS software.
- PD/PM Status Meetings will resolve contractual, scheduling and project issues and risks.
- Action Item Meetings with Netsmart will review ongoing progress on project tasks and any other open issue which requires discussion and decision to keep project tasks moving forward.
- Continue implementation activities and meetings for testing with Legal Entities, training, site readiness and roll-out tasks.
- Review submitted change requests in accordance with IBHIS Change Control Management Plan.
- Monitor and manage software modification change submissions and approvals.
- Super users will train DMH end-users for roll-out number 4 through number 5.

F. Critical Issues

List any Critical or High Priority Issues impacting the project. Issues are events that currently cause a problem moving forward and have an impact to the project schedule, resources or quality of the end deliverable.

- **Provisioning and Testing Resources** – With the help of 14 recently trained DMH CIOB employees, DMH CIOB was able to successfully process Trading Partner Agreements (TPAs), issue new Digital Certificates (Keys) and conduct EDI Claiming structural validation with all Pilot 1 Contract Providers (13 in total) in about a two-month period. Two out of the 13 Contract Providers have gone live with Client Web Services and EDI Claiming. DMH is currently conducting CWS and EDI certification process with the rest of the Pilot 1 Contract Providers. However, this experience has raised a concern regarding the needed technical resources to successfully provision the rest of the Contract Providers in a very short period of time (about 80 Contract Providers per month). In order for DMH to resolve technical issues during the Contract Provider provisioning process, DMH needs to have technical resources with the right skill set added to the integration team. Furthermore, there is an urgent need for technical resources to support and address post Pilot 1 technical issues pertaining to real-time (24/7) Contract Provider interfaces, such as COS, EDI, Client Web Services, to ensure all interfaces are fully tested, operational and production ready for the successful integration of Contract Provider data to DMH's system. ISD was not able to assign the requested six (6) ISD employees to DMH for the peak period of this activity. Therefore, we have reached out to other DMH divisions to repurpose some in-house staff until all Contract Providers have gone live in IBHIS. As of February 24, 2014, we have allocated four (4) additional staff at a percentage of their time to assist with this effort. IBHIS team still regards this as a risk because the team does not have these resources at 100%. The team has learned, as the team continues to provision Contract Providers, that many of them need assistance with TPA submission, certificate installation and connection to DMH servers to be able to upload files to begin CWS and EDI Claiming Testing.
- **IS Push (formerly known as Avatar to IS Synchronization)** – The IS Push process has been implemented and is in Production Use. By utilizing the newly created Web Services functionality, new client records can be transferred from the IS for those DMH locations that have yet to be rolled into IBHIS.
- **Completion of CalPM and MSO Configuration Activities Based on the To Be Central Business Office (CBO) and Provider Services Office (PSO) models** – Configuration review has been completed for Directly Operated sites. Examination of settings for Legal Entities was completed mid-March 2014. Profile lowered accordingly.
- **Delay in the development of CBO** – On March 11, 2014, the Board approved the development and requested positions for CBO and PSO to support the roll-out of IBHIS and new business requirements mandated under the Affordable Care Act. Hiring will begin immediately on the 51 positions with key positions targeted to be filled no later than July 2014. In the interim, Netsmart consultant services have been retained to bridge this staffing gap and to provide ongoing transitional support to the CBO through calendar year 2014.
- **Time constraint in completing overlapping IBHIS implementation tasks with existing resources** – DMH has successfully managed the pilot go-live events. This was eased by a smaller number of contract providers and their vendors being ready to go live for Pilot 1. This issue has now be renamed to delete the reference to pilot test dates as resource constraints remain for all roll-outs with both the directly operated and the contract providers. Each DO deployment requires a substantial investment of resources prior to the go-live in order to assure readiness and a commitment of resources for support in the weeks after go-live. For the implementation team, there is no downtime between deployments. The biggest concern is that the contract providers have been slow to engage in testing their electronic interfaces to IBHIS in preparation for their transition to claiming via IBHIS. DMH is marginally staffed to support the contract provider testing process for the go-live transition if the contract providers follow the current schedule. Currently, the contract providers are not keeping with the schedule. DMH is not staffed to handle a surge of contract provider testing in May and June in belated anticipation of the July 1, 2014 go-live date for contract providers. DMH is encouraging contract providers to make every effort to do their testing on the schedule provided. In addition, DMH is looking at acquiring assistance from ISD or through ITSSMA in case the contract providers do not meet the testing schedule.

- **Additional Resources for Site Assessments** - DMH continues to require additional resources beyond the two (2) who are partially assigned to perform the technical and training assessment for DMH Directly Operated sites. Although five (5) of eight (8) roll-out group assessments have been completed, technology procurement, deployment, and support remains a concern because of continuing resource constraints. Without additional resources to conduct additional site assessments, the remaining DMH locations may not receive detailed assessments and remediation to ensure a successful roll-out at their locations.
- **Delayed Development of IBHIS Cutover Plan** – The task was completed and go-live executed per the Cutover Plan. Issue closed.
- **Impact of unresolved Error Correction task in clinical and financial operations on training, forms/reports creation and other IBHIS implementation tasks** – Training materials were developed in January 2014. DMH may develop eModules to compliment training materials. Issue closed.

G. Risk Update

Include any critical or high risk updates. Risks are events that might cause problems, at a future date, with the project schedule, resources or quality of the end deliverable.

Explanation of Categories:

- **Probability (High):** Most certainly or very likely to occur.
- **Impact (High):** Significant impact to project scope, cost or schedule which is likely to threaten and undermine project completion.
- **Timeframe (Short):** A three (3) month or less estimation as to how long the risk will be relevant.
- **Response (Mitigate, Watch, and Accept):** Resolve through mitigation, watch to monitor development, or accept and develop a contingency plan.

ID	Risk (Describe the risk in simple terms, provide details)	Probability (High)	Impact (High)	Timeframe (Short)	Response (Mitigate, Watch, Accept)
41	<p>Title – Ability to find clients in the large DMH client database</p> <p>Description – The current Avatar large database search does not work and needs to be redesigned to allow for the staff to select the client from a list of five (5) names or less, at least 95% of the time.</p> <p>Status – DMH is working with NTST to further refine client search capabilities. To this end, Advanced Search functionality has been implemented to input additional client specific information to assist in improved client identification within DMH's large client database.</p>	☒	☒	☒	Risk Avoidance

ID	Risk (Describe the risk in simple terms, provide details)	Probability (High)	Impact (High)	Timeframe (Short)	Response (Mitigate, Watch, Accept)
42	<p>Title – Hardware delay impact ability to scan charts and records prior to go-live</p> <p>Description – An important step in cutover is to have client chart info and authorizations for those clients having appointments during the first two (2) weeks of site launch.</p> <p>Status – As County's MPS Project is implemented, Multi-Function Devices will be deployed. As an interim solution, DMH is acquiring desktop scanners to assist in capturing paper based documentation into IBHIS.</p>	☒	☒	☒	Risk Avoidance